

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

FILING DATE

09/700948

CLAIMS

AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL	2				
SP.					
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AM.					

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IND.	DEP.	IND.
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TOTAL IND.		
TOTAL DEP.		
TOTAL CLAIMS		

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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